

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X6000

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Arni's Pizza Establishment Address (number and street, city, state, zip code) 3700 Paoli Pike Floyds Kobs, IN 47119 Owner Brad Cohn Owner's Address						Telephone Number (\$12) P\$Shars 5 () Owner Purpose: 1. Routine	Date of Inspection (mm/dd/yr) 3/4/20/9 Follow-up Release Date No // Jays		/8-/9 se Date
Person in Charge Beth Crider Responsible Person's E-mail Certified Food Handler Christy Alta (3/31/21) CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS						 Follow-up Complaint Pre-Operational Temporary HACCP Other (list) 	Summary of Violations: C		
	C/NC	R Observed	VIOUS INSPEC	tions are deno	Narrative	MMARY OF VIOLATIONS" AN			rrected By
413 431 433	NC NC	Observa Observa Observa	Observed light shield missing from BOH storage / week Observed 1/2" vertical dues garp at main entrance I week Observed prep and BOH certing to be splathred/spotted I week Observed nop not property two / map note meding dupoil Today						
Received by Received by	(name and t 1044 (signature):	itle printed): (Yide)				Inspected by (name and title pri	nted): Ingran	(EHS)
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